

How to Care for Nasogastric Tube (NG) at Home

What happens after an NG tube is placed in GI Clinic:

- After placing an NG tube, the patient will be sent to Radiology for an abdominal x-ray (KUB) to verify placement of NG tube
- NG tube feeds cannot be started until the KUB is completed and NG tube placement is verified
- A Nurse will call the guardian/caregiver on file to review the results of the KUB

We encourage the family to stay on campus until you are contacted with the results of the abdominal x-ray

Make sure the NG tube is secure:

- Make sure the NG tube is taped securely to the nose or cheek.
- Do not push or pull the NG tube. Keep it in place
- Check the side of the nose where the NG tube is inserted for any signs of infection. This includes redness, sores, drainage that is green or yellow, or dryness

Keep the NG tube and supplies clean and working:

- Wash your hands before and after touching the NG tube
- Flush the NG tube with warm water 4 times a day to keep it from clogging
- Clean the area around the nose with NG tube inserted with care
- If needed, clean the outside of the NG tube with soap and water
- Do not let the end of the NG tube touch anything when you disconnect a syringe or tubing.
- Ask if it is OK to reuse your feeding supplies. If so, wash them in warm soapy water and rinse well after each feeding
- Always keep an extra NG tube on hand and know the size and type

Key Points to remember:

- Check nares (opening of the nose) where the NG tubing contacts for skin breakdown. Check any other tubing contact points (ears, neck, etc.) for skin breakdown
- Nares will be alternated when replacing the NG tube to avoid skin breakdown

When to seek medical care:

- **Stop the feeding if your child has severe coughing, blueness around lips, or difficulty breathing. Call 911 if your child is having trouble breathing or color does not improve right away.**
- NG tube falls out
- NG tube is clogged
- Redness, swelling, leakage or sores develop in the skin around the tube site
- You see blood around the NG tube, in child's stool, or in the stomach contents
- Your child coughs, chokes, or vomits while feeding
- Swelling of belly
- Diarrhea or constipation
- Fever:
 - In an infant under 3 months old, a rectal temperature of 100.4°F (38.0°C) or higher

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- In a child of any age who repeatedly has a temperature of 104.0°F (40.0°C) or higher
- A fever that lasts more than 24 hours

How to seek medical care:

- If you have any questions, or if any of the issues above occur, please call the live GI nurse line at 858-966-4003 option 3 before going to the ED. The nurse line is open from 8:00AM –4:30PM Monday through Friday. We are closed from 12pm-1pm daily for lunch and will respond to messages upon return.
- The Rady Resource Nurse Line is also available 24 hours a day and 7 days a week at 858-966-5901 for general feeding tube questions.
- If you have any issues or concerns outside of those hours, we recommend you call the ON CALL GI Fellow Line at 858-966-1700 option 0 and request to speak with the ON CALL GI Fellow